### Case 16-81579 Doc 1 Filed 06/30/16 Entered 06/30/16 10:38:28 Desc Main Document Page 1 of 46

| Fill in this information to identify your case: |                               |                                   |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the:         |                               |                                   |
| NORTHERN DISTRICT OF ILLINOIS                   |                               |                                   |
| Case number (if known)                          | Chapter you are filing under: |                                   |
|   | Chapter 7                     |                                   |
|   | ☐ Chapter 11                  |                                   |
|   | ☐ Chapter 12                  |                                   |
|   | ☐ Chapter 13                  | ☐ Check if this an amended filing |

### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself  |   |   |
|-----|---|---|---|
|     |   | About Debtor 1:                               | About Debtor 2 (Spouse Only in a Joint Case): |
| 1.  | Your full name  |   |   |
|     | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). | Ethel First name  L. Middle name              | First name  Middle name                       |
|     | Bring your picture identification to your meeting with the trustee.   | Fort Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III)      |
| 2.  | All other names you have used in the last 8 years   |   |   |
|     | Include your married or maiden names.   |   |   |
| 3.  | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)         | xxx-xx-8235                                   |   |

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Case number (if known)

Debtor 1 Ethel L. Fort

|  |   | About Debtor 1:   | A                | About Debtor 2 (Spouse Only in a Joint Case):  |  |  |  |
|--|---|---|------------------|--|--|--|--|
| 4. Any business names and<br>Employer Identification<br>Numbers (EIN) you have<br>used in the last 8 years |   | ■ I have not used any business name or EINs.  |                  | ☐ I have not used any business name or EINs.   |  |  |  |
|  | Include trade names and doing business as names | Business name(s)  | Business name(s) |  |  |  |  |
|  |   | EINs  | Ē                | EINs   |  |  |  |
| 5.   | Where you live                                  |   | li               | f Debtor 2 lives at a different address:   |  |  |  |
|  |   | 1217 Foster Avenue<br>Rockford, IL 61102  |                  |  |  |  |  |
|  |   | Number, Street, City, State & ZIP Code  | N                | Number, Street, City, State & ZIP Code   |  |  |  |
|  |   | Winnebago   |                  |  |  |  |  |
|  |   | County  | County           |  |  |  |  |
|  |   | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | i                | f Debtor 2's mailing address is different from yours, fill it n here. Note that the court will send any notices to this nailing address.         |  |  |  |
|  |   | Number, P.O. Box, Street, City, State & ZIP Code  | ٨                | Number, P.O. Box, Street, City, State & ZIP Code   |  |  |  |
| ò.   | Why you are choosing this district to file for  | Check one:  | C                | Check one:   |  |  |  |
|  | bankruptcy                                      | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                |                  | <ul> <li>Over the last 180 days before filing this petition, I<br/>have lived in this district longer than in any other<br/>district.</li> </ul> |  |  |  |
|  |   | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)  |                  | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)  |  |  |  |
|  |   |   |                  |  |  |  |  |

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Case number (if known) Debtor 1 Ethel L. Fort

| ar                                       | Tell the Court About  | Your Ba     | nkruptcy Ca                                     | ase  |  |  |  |  |
|--|---|-------------|---|--|--|--|--|--|
| 7.                                       | The chapter of the Bankruptcy Code you are  |             |   |  | of each, see <i>Notice Required by</i> page 1 and check the appropria                                    | 11 U.S.C. § 342(b) for Individuals Filing f<br>te box.   | or Bankruptcy                          |  |
|  | choosing to file under  | ■ Chapter 7 |   |  |  |  |  |  |
|  |   | ☐ Ch        | apter 11  |  |  |  |  |  |
|  |   | ☐ Ch        | apter 12  |  |  |  |  |  |
|  |   | ☐ Ch        | apter 13  |  |  |  |  |  |
| 3. How you will pay the fee              |   | 6           | about how yo                                    | ou may pay. Typ<br>attorney is subn                        | ically, if you are paying the fee ye   | ck with the clerk's office in your local cours<br>ourself, you may pay with cash, cashier's<br>aalf, your attorney may pay with a credit ca  | check, or money                        |  |
|  |   |             |   |  | allments. If you choose this opti s (Official Form 103A).  | on, sign and attach the Application for Inc  | lividuals to Pay                       |  |
|  |   |             | request that<br>out is not req<br>applies to yo | at my fee be wa<br>juired to, waive y<br>ur family size an | ived (You may request this option our fee, and may do so only if you do you are unable to pay the fee it | on only if you are filing for Chapter 7. By late our income is less than 150% of the official in installments). If you choose this option, cial Form 103B) and file it with your petition. | Il poverty line that you must fill out |  |
| Have you filed for bankruptcy within the |   | ■ No.       |   |  |  |  |  |  |
|  | last 8 years?   | ☐ Yes       |   |  |  |  |  |  |
|  |   |             | District  |  | When   |  |  |  |
|  |   |             | District  |  | When   | Case number  |  |  |
|  |   |             | District  |  | When   | Case number  |  |  |
| 10.                                      | Are any bankruptcy cases pending or being   | ■ No        |   |  |  |  |  |  |
|  | filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>partner, or by an<br>affiliate? | ☐ Yes       |   |  |  |  |  |  |
|  |   |             | Debtor  |  |  | Relationship to you  |  |  |
|  |   |             | District  |  | When   | Case number, if known  |  |  |
|  |   |             | Debtor  |  |  | Relationship to you  |  |  |
|  |   |             | District  |  | When   | Case number, if known  |  |  |
| 11.                                      | Do you rent your residence?   | □ No.       | Go to   | line 12.   |  |  |  |  |
|  | residence:  | ■ Yes       | . Has yo  | our landlord obta  | ined an eviction judgment agains   | st you and do you want to stay in your res   | idence?                                |  |
|  |   |             |   | No. Go to line   | 12.  |  |  |  |
|  |   |             |   | Yes. Fill out <i>Ini</i> bankruptcy pet                    |  | Judgment Against You (Form 101A) and   | file it with this                      |  |
|  |   |             |   |  |  |  |  |  |

Document Page 4 of 46 Case number (if known) Debtor 1 Ethel L. Fort Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

immediate attention?

needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Ethel L. Fort Page 5 of 46 Case number (if known)

Part 5:

### Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Deb  | tor 1 Ethel L. Fort  |                                   | Document  | Page 6 of 46 Cas  | se number (if kno  | wn)   |  |
|------|--|-----------------------------------|---|---|--------------------|---|--|
| Part |  | ions for R                        | enorting Purposes   |   |                    |   |  |
|      | What kind of debts do you have?                                | 16a.                              |   |   |                    | 11 U.S.C. § 101(8) as "incurred by an                                     |  |
|      |  |                                   | ☐ No. Go to line 16b.   |   |                    |   |  |
|      |  |                                   | Yes. Go to line 17.   |   |                    |   |  |
|      |  | 16b.                              | Are your debts primarily busines money for a business or investmen              |   |                    |   |  |
|      |  |                                   | ☐ No. Go to line 16c.   |   |                    |   |  |
|      |  |                                   | ☐ Yes. Go to line 17.   |   |                    |   |  |
|      |  | 16c.                              | State the type of debts you owe that  | it are not consumer debts o   | or business debt   | s<br>   |  |
| 17.  | Are you filing under Chapter 7?                                | □ No.                             | I am not filing under Chapter 7. Go   | to line 18.   |                    |   |  |
|      | Do you estimate that after any exempt property is excluded and | ■ Yes.                            | I am filing under Chapter 7. Do you are paid that funds will be available       |   |                    | excluded and administrative expenses                                      |  |
|      | administrative expenses are paid that funds will               |                                   | No  |   |                    |   |  |
|      | be available for<br>distribution to unsecured<br>creditors?    |                                   | ☐ Yes   |   |                    |   |  |
| 18.  | How many Creditors do you estimate that you owe?               | <b>1</b> -49                      |   | □ 1,000-5,000   | [                  | □ 25,001-50,000   |  |
|      |  | □ 50-99                           |   | ☐ 5001-10,000   |                    | ☐ 50,001-100,000  |  |
|      |  | ☐ 100-1<br>☐ 200-9                |   | 10,001-25,000   | ι                  | ☐ More than100,000  |  |
| 19.  | How much do you  | <b>\$</b> 0 - \$                  | 650,000   | □ \$1,000,001 - \$10 millio   | n [                | ☐ \$500,000,001 - \$1 billion   |  |
|      | estimate your assets to be worth?                              | □ \$50,0                          | 001 - \$100,000   | □ \$10,000,001 - \$50 mill  |                    | ☐ \$1,000,000,001 - \$10 billion  |  |
|      |  |                                   | ,001 - \$500,000<br>,001 - \$1 million  | □ \$50,000,001 - \$100 mil □ \$100,000,001 - \$500 m  |                    | ☐ \$10,000,000,001 - \$50 billion<br>☐ More than \$50 billion             |  |
| 20.  | How much do you  | <b>\$0 - \$</b>                   | \$50,000  | □ \$1,000,001 - \$10 millio   |                    | ☐ \$500,000,001 - \$1 billion   |  |
|      | estimate your liabilities to be?                               |                                   | 001 - \$100,000   | □ \$10,000,001 - \$50 mill □ \$50,000,001 - \$100 mill  |                    | 3 \$1,000,000,001 - \$10 billion  |  |
|      |  |                                   | ,001 - \$500,000<br>,001 - \$1 million  | □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$50 billion |                    |   |  |
| Part | 7: Sign Below  |                                   | ***************************************   |   |                    |   |  |
|      | you  | I have ex                         | xamined this petition, and I declare u  | nder penalty of perjury that  | the information    | provided is true and correct.   |  |
|      | •  | If I have                         | chosen to file under Chapter 7, I am  | aware that I may proceed  | if eliaible under  | Chapter 7 11 12 or 13 of title 11   |  |
|      |  |                                   | tates Code. I understand the relief av  |   |                    |   |  |
|      |  |                                   | orney represents me and I did not pay<br>nt, I have obtained and read the notic |   |                    | torney to help me fill out this   |  |
|      |  | I request                         | t relief in accordance with the chapter   | of title 11, United States C  | Code, specified in | n this petition.  |  |
|      |  | bankrupt<br>and 357               | 1.  |   |                    | erty by fraud in connection with a or both. 18 U.S.C. §§ 152, 1341, 1519, |  |
|      |  | /s/ Ethe<br>Ethel L.<br>Signature |   | Signature   | of Debtor 2        |   |  |
|      |  | Executed                          |   | Executed  |                    |   |  |
|      |  |                                   | MM / DD / YYYY  |   | MM / DD /          | YYYY  |  |

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Debtor 1 Ethel L. Fort Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Jeffry A<br>Signature of | Dahlberg<br>Attorney for Debtor | Date          | June 23, 2016<br>MM / DD / YYYY |
|------------------------------|---------------------------------|---------------|---------------------------------|
| Jeffry A Da                  | hlberg                          |               |                                 |
| Balsley & D                  | Dahlberg                        |               |                                 |
| Loves Park                   |                                 |               |                                 |
| Number, Street,              | City, State & ZIP Code          |               |                                 |
| Contact phone                | (815) 877-2593                  | Email address | www.balsleylawoffice.com        |
| 6206776                      |                                 |               |                                 |
| Bar number & St              | ate                             |               |                                 |

|                    |                          | Docume            | ent Page 8 of 46 |  |
|--------------------|--------------------------|-------------------|------------------|--|
| Fill in this infor | mation to identify your  | case:             |                  |  |
| Debtor 1           | Ethel L. Fort            |                   |                  |  |
|                    | First Name               | Middle Name       | Last Name        |  |
| Debtor 2           |                          |                   |                  |  |
| Spouse if, filing) | First Name               | Middle Name       | Last Name        |  |
| United States Ba   | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS      |  |
| Case number        |                          |                   |                  |  |

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | t 1: Summarize Your Assets   |              |                               |
|-----|--|--------------|-------------------------------|
|     |  | Your a       | ssets<br>of what you own      |
| 1.  | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B   | \$           | 0.00                          |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$           | 1,425.00                      |
|     | 1c. Copy line 63, Total of all property on Schedule A/B  | \$           | 1,425.00                      |
| Par | t 2: Summarize Your Liabilities  |              |                               |
|     |  |              | <b>abilities</b><br>t you owe |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$           | 0.00                          |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                            | \$           | 0.00                          |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$           | 14,330.94                     |
|     | Your total liabilities   | \$           | 14,330.94                     |
| Par | t 3: Summarize Your Income and Expenses  |              |                               |
| 4.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$           | 194.00                        |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$           | 1,125.00                      |
| Par | t 4: Answer These Questions for Administrative and Statistical Records   |              |                               |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                     | ır other sch | nedules.                      |
| 7.  | ■ Yes What kind of debt do you have?   |              |                               |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

Debtor 1 Ethel L. Fort Page 9 of 46
Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_194.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total | claim |
|--|-------|-------|
| From Part 4 on Schedule E/F, copy the following:   |       |       |
| 9a. Domestic support obligations (Copy line 6a.)   | \$    | 0.00  |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$    | 0.00  |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$    | 0.00  |
| 9d. Student loans. (Copy line 6f.)   | \$    | 0.00  |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$    | 0.00  |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$   | 0.00  |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$    | 0.00  |

|  |   | Documer  |  |   |
|--|---|--|--|---|
| Fill in this infor   | mation to identify yo   | our case and this filing:  |  |   |
| Debtor 1   | Ethel L. Fort   |  |  |   |
|  | First Name  | Middle Name  | Last Name  |   |
| Debtor 2<br>(Spouse, if filing)  | First Name  | Middle Name  | Last Name  |   |
| , ,  |   |  |  |   |
| United States Ba   | ankruptcy Court for the   | e: NORTHERN DISTRICT O   | FILLINOIS  |   |
| Case number  |   |  |  | ☐ Check if this is an   |
| _  |   |  |  | amended filing  |
|  |   |  |  |   |
| Official Fo  | rm 106A/B   |  |  |   |
|  |   |  |  |   |
| <u>Scneau</u>  | le A/B: Pro   | perty  |  | 12/15   |
| think it fits best. E  | Be as complete and acc<br>re space is needed, atta  | urate as possible. If two married  | ce. If an asset fits in more than one category, list to people are filing together, both are equally respon . On the top of any additional pages, write your nar                                     | sible for supplying correct   |
| Part 1: Describe   | Each Residence, Build   | ling, Land, or Other Real Estate   | You Own or Have an Interest In   |   |
| 1. Do you own or   | have any legal or equita  | able interest in any residence, bu   | uilding, land, or similar property?  |   |
| No. Go to Pa   | rt 2.   |  |  |   |
| ☐ Yes. Where   | is the property?  |  |  |   |
| Part 2: Describe   | Your Vehicles   |  |  |   |
|  |   |  |  |   |
| Do you own, lea  |   |  | cles, whether they are registered or not? Incle G: Executory Contracts and Unexpired Leases  |   |
| Do you own, lea<br>someone else dri  | ives. If you lease a veh  |  | e G: Executory Contracts and Unexpired Leases  |   |
| Do you own, lea<br>someone else dri<br>3. Cars, vans, tr   | ives. If you lease a veh  | hicle, also report it on Schedule  | e G: Executory Contracts and Unexpired Leases  |   |
| Do you own, leasomeone else dri 3. Cars, vans, tr  | ives. If you lease a veh  | hicle, also report it on Schedule  | e G: Executory Contracts and Unexpired Leases  |   |
| Do you own, lea<br>someone else dri<br>3. Cars, vans, tr   | ives. If you lease a veh  | hicle, also report it on Schedule  | e G: Executory Contracts and Unexpired Leases  |   |
| Do you own, leasomeone else dri 3. Cars, vans, tr No Yes  4. Watercraft, ai  | ives. If you lease a velous, tractors, sport  | hicle, also report it on Schedule t utility vehicles, motorcycles , ATVs and other recreationa   | e G: Executory Contracts and Unexpired Leases  |   |
| Do you own, leas someone else dri 3. Cars, vans, tr No Yes  4. Watercraft, ai Examples: Boa  | ives. If you lease a velous, tractors, sport  | hicle, also report it on Schedule t utility vehicles, motorcycles , ATVs and other recreationa   | e G: Executory Contracts and Unexpired Leases  at vehicles, other vehicles, and accessories  |   |
| Do you own, leasomeone else dri 3. Cars, vans, tr No Yes  4. Watercraft, al Examples: Boo  | ives. If you lease a velous, tractors, sport  | hicle, also report it on Schedule t utility vehicles, motorcycles , ATVs and other recreationa   | e G: Executory Contracts and Unexpired Leases  at vehicles, other vehicles, and accessories  |   |
| Do you own, leas someone else dri 3. Cars, vans, tr No Yes  4. Watercraft, ai Examples: Boa  | ives. If you lease a velous, tractors, sport  | hicle, also report it on Schedule t utility vehicles, motorcycles , ATVs and other recreationa   | e G: Executory Contracts and Unexpired Leases  at vehicles, other vehicles, and accessories  |   |
| Do you own, leasomeone else dri 3. Cars, vans, tr No Yes  4. Watercraft, al Examples: Boo  | ives. If you lease a velous, tractors, sport  | hicle, also report it on Schedule t utility vehicles, motorcycles , ATVs and other recreationa   | e G: Executory Contracts and Unexpired Leases  at vehicles, other vehicles, and accessories  |   |
| Do you own, leasomeone else dri  Cars, vans, tr No Yes  Watercraft, ai Examples: Bos   | ives. If you lease a velous, tractors, sport ircraft, motor homes, ats, trailers, motors, pe  | hicle, also report it on Schedule t utility vehicles, motorcycles , ATVs and other recreational ersonal watercraft, fishing vess   | e G: Executory Contracts and Unexpired Leases  at vehicles, other vehicles, and accessories  | j   |
| Do you own, leasomeone else dri 3. Cars, vans, tr No Yes  4. Watercraft, ai Examples: Box No Yes   | ives. If you lease a vel<br>rucks, tractors, sport<br>ircraft, motor homes<br>ats, trailers, motors, pe   | hicle, also report it on Schedule t utility vehicles, motorcycles , ATVs and other recreational ersonal watercraft, fishing vess   | e G: Executory Contracts and Unexpired Leases  al vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories   | \$0.00  |
| Do you own, leasomeone else dri 3. Cars, vans, tr No Yes  4. Watercraft, ai Examples: Box No Yes  5 Add the dollanges you here   | ives. If you lease a velous, tractors, sport ircraft, motor homes, ats, trailers, motors, per arreading arreading of the portion ave attached for Particles.  | hicle, also report it on Schedule trutility vehicles, motorcycles that all the second watercraft, fishing vess on you own for all of your enter 2. Write that number here  | e G: Executory Contracts and Unexpired Leases  al vehicles, other vehicles, and accessories lels, snowmobiles, motorcycle accessories  tries from Part 2, including any entries for                  | \$0.00  |
| Do you own, leasomeone else dri 3. Cars, vans, tr No Yes  4. Watercraft, al Examples: Box No Yes  5 Add the dolla pages you h  | ives. If you lease a velous, tractors, sport ircraft, motor homes, ats, trailers, motors, per arready | hicle, also report it on Schedule trutility vehicles, motorcycles that all the series and other recreations ersonal watercraft, fishing vession you own for all of your enter 2. Write that number here  | e G: Executory Contracts and Unexpired Leases  al vehicles, other vehicles, and accessories tels, snowmobiles, motorcycle accessories  tries from Part 2, including any entries for                  | \$0.00  |
| Do you own, leasomeone else dri 3. Cars, vans, tr No Yes  4. Watercraft, ai Examples: Box No Yes  5 Add the dolla pages you he  Part 3: Describe Do you own or                                     | rucks, tractors, sport<br>rucks, tractors, sport<br>ircraft, motor homes,<br>ats, trailers, motors, pe<br>ar value of the portio<br>ave attached for Part   | nicle, also report it on Schedule trutility vehicles, motorcycles a utility vehicles, motorcycles and other recreational ersonal watercraft, fishing vess to you own for all of your enter 2. Write that number here   | e G: Executory Contracts and Unexpired Leases  al vehicles, other vehicles, and accessories tels, snowmobiles, motorcycle accessories  tries from Part 2, including any entries for                  | \$0.00  |
| Do you own, leasomeone else dri 3. Cars, vans, tr  No Yes  4. Watercraft, ai Examples: Box No Yes  5 Add the dolla pages you h  Part 3: Describe Do you own or  6. Household ge Examples: Ma       | rucks, tractors, sport ircraft, motor homes, ats, trailers, motors, pe ar value of the portio ave attached for Part e Your Personal and Ho have any legal or equ oods and furnishings ajor appliances, furnitu  | nicle, also report it on Schedule trutility vehicles, motorcycles a utility vehicles, motorcycles and other recreational ersonal watercraft, fishing vess to you own for all of your enter 2. Write that number here   | e G: Executory Contracts and Unexpired Leases  al vehicles, other vehicles, and accessories tels, snowmobiles, motorcycle accessories  tries from Part 2, including any entries for                  | \$0.00  Current value of the portion you own? Do not deduct secured |
| Do you own, leasomeone else dri 3. Cars, vans, tr  No Yes  4. Watercraft, ai Examples: Box No Yes  5 Add the dolla pages you h  Part 3: Describe Do you own or  6. Household gr Examples: Mareners | rucks, tractors, sport ircraft, motor homes, ats, trailers, motors, pe ar value of the portio ave attached for Part e Your Personal and Ho have any legal or equ oods and furnishings ajor appliances, furnitu  | thicle, also report it on Schedule trutility vehicles, motorcycles trutility vehicles, motorcycles and other recreational ersonal watercraft, fishing vession you own for all of your enterest. Write that number here busehold Items uitable interest in any of the | e G: Executory Contracts and Unexpired Leases  al vehicles, other vehicles, and accessories tels, snowmobiles, motorcycle accessories  tries from Part 2, including any entries for                  | \$0.00  Current value of the portion you own? Do not deduct secured |
| Do you own, leasomeone else dri 3. Cars, vans, tr  No Yes  4. Watercraft, ai Examples: Box No Yes  5 Add the dolla pages you h  Part 3: Describe Do you own or  6. Household ge Examples: Ma       | ircraft, motor homes, ats, trailers, motors, per ar value of the portion ave attached for Part e Your Personal and Hohave any legal or equipoods and furnishings ajor appliances, furnituation  | thicle, also report it on Schedule trutility vehicles, motorcycles trutility vehicles, motorcycles and other recreational ersonal watercraft, fishing vession you own for all of your enterest. Write that number here busehold Items uitable interest in any of the | e G: Executory Contracts and Unexpired Leases  al vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories  tries from Part 2, including any entries for  following items? | \$0.00  Current value of the portion you own? Do not deduct secured |

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

| Debtor 1                                  |                                     | 16-81579                             | Doc 1          | Filed 06/30/16<br>Document | Entered 06/30/16 10:38:28 Page 11 of 46 Case number (if known, | Desc Main   |
|---|-------------------------------------|--------------------------------------|----------------|----------------------------|--|---|
| Deptor i                                  | Ethel L. I                          | -оп                                  |                |                            | Case number (# known)  |   |
|   |                                     | 2 TV's                               |                |                            |  | \$300.00  |
|   |                                     |                                      |                |                            | oks, pictures, or other art objects; stamp, coir               | n, or baseball card collections;  |
| 9. <b>Equipm</b>                          | les: Sports, p                      | rts and hobbies                      |                | other hobby equipment;     | bicycles, pool tables, golf clubs, skis; canoes                | and kayaks; carpentry tools;  |
| ■ No<br>□ Yes.                            | Describe                            |                                      |                |                            |  |   |
| ■ No                                      |                                     |                                      | s, ammunition  | i, and related equipment   | t  |   |
| □ No                                      |                                     |                                      | leather coats  | s, designer wear, shoes    | , accessories  |   |
|   |                                     | Clothing                             | and persor     | nal items                  |  | \$400.00  |
| ■ No □ Yes.  13. Non-fa Examp ■ No □ Yes. | Describe  arm animals ples: Dogs, o | cats, birds, horse                   | es             |                            | ding rings, heirloom jewelry, watches, gems,                   | gold, silver  |
| ■ No<br>□ Yes.                            | Give specif                         | ic information                       |                |                            |  |   |
|   |                                     |                                      |                | om Part 3, including a     | ny entries for pages you have attached                         | \$1,400.00  |
|   |                                     | Financial Assets<br>any legal or equ | uitable intere | est in any of the follow   | ring?  | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ■ No                                      |                                     |                                      |                | our home, in a safe depo   | osit box, and on hand when you file your peti                  | tion  |
| Exam <sub>l</sub><br>□ No                 | instituti                           | ng, savings, or o                    |                | ounts with the same ins    |  | houses, and other similar   |
| Yes                                       |                                     |                                      |                | Institution r              | name:  |   |

| Debto             |                                    | L. Fort   |   | Document              | Page 12 of            | 46<br>Case number (if known)                 |  |
|-------------------|------------------------------------|---|---|-----------------------|-----------------------|--|--|
|                   |                                    | 17.1.   | Credit Union<br>Savings   | Rock Vall             | ey                    |  | \$25.00                                |
| <i>E</i> :        | xamples: Bo                        | nd funds, investm   | cly traded stocks<br>nent accounts with br  |                       | ney market accoun     | ts   |  |
|                   | int venture                        | raded stock and   | I interests in incorp   | orated and uninc      | orporated busine      | sses, including an interes                   | t in an LLC, partnership, and          |
| Π,                | Yes. Give sp                       |   | n about them<br>ame of entity:  |                       |                       | % of ownership:                              |  |
| N<br>N<br>■ I     | egotiable ins<br>on-negotiab<br>No | struments include<br>le instruments are<br>ecific information | personal checks, case those you cannot transact them such about them              | shiers' checks, pro   | missory notes, and    | d money orders.                              |  |
| <i>E</i> :        | <i>xamples:</i> Inte<br>No         | •   | ISA, Keogh, 401(k), 4   | 403(b), thrift saving | gs accounts, or othe  | er pension or profit-sharing                 | plans                                  |
| ⊔`                | Yes. List ead                      | ch account separa<br>Type                                     | etely. of account:  | Institution r         | name:                 |  |  |
| Yo<br>E.          | our share of<br>xamples: Ag        |   | its you have made so  |                       |                       | e from a company<br>elecommunications compar | nies, or others                        |
| <b>■</b> 1        | No<br>Yes                          |   |   | Institution r         | name or individual:   |  |  |
| <b>=</b> 1        |                                    |   | odic payment of mon-  | ey to you, either fo  | r life or for a numbe | er of years)                                 |  |
| 26                | U.S.C. §§ 5                        | <b>education IRA</b> ,<br>30(b)(1), 529A(b)                   | in an account in a q<br>, and 529(b)(1).  | ualified ABLE pro     | ogram, or under a     | qualified state tuition pro                  | ogram.                                 |
| <b>■</b> 1        | No<br>Yes                          | Institution   | name and descriptio   | n. Separately file t  | he records of any in  | nterests.11 U.S.C. § 521(c):                 | 4                                      |
|                   | No .                               | ble or future inte  |   | other than anythir    | ng listed in line 1), | , and rights or powers exe                   | rcisable for your benefit              |
| 26. <b>Pa</b>     | itents, copy<br>xamples: Inte      | rights, trademar  | ks, trade secrets, and the secrets, and the secrets, and the secrets are secrets. |                       |                       | ements                                       |  |
| ■ <sub>1</sub>    |                                    | pecific information   | n about them  |                       |                       |  |  |
| <i>E</i> :<br>■ 1 | <i>xamples:</i> Bu<br>No           | ilding permits, exc   |   |                       | n holdings, liquor li | icenses, professional licens                 | es                                     |
|                   |                                    | pecific information  y owed to you?                           | i adout them  |                       |                       |  | Current value of the                   |
|                   | , p. epsi.                         | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,                       |   |                       |                       |  | portion you own? Do not deduct secured |

Official Form 106A/B Schedule A/B: Property page 3

claims or exemptions.

| Debtor 1  | Ethel L. Fort   | Docu  | ıment          | Page 13 of 46 Case number (if kno)            | wn)                           |
|---|---|---|----------------|---|-------------------------------|
|   |   |   |                |   |                               |
| ≥8. Tax re  | funds owed to you   |   |                |   |                               |
|   | Give specific informa   | tion about them, including whe  | ther you alre  | eady filed the returns and the tax years      |                               |
| ■ No  |   | 27.1  | t, child supp  | oort, maintenance, divorce settlement, prop   | erty settlement               |
| Exam <sub>l</sub> ■ No  | benefits; unpaid  | isability insurance payments, o<br>loans you made to someone e                                    |                | nefits, sick pay, vacation pay, workers' con  | npensation, Social Security   |
| ☐ Yes.  | Give specific informa   | tion  |                |   |                               |
| Exam <sub>i</sub><br>■ No<br>—  |   | or life insurance; health savin   |                | (HSA); credit, homeowner's, or renter's ins   |                               |
|   |   | Company name:   |                | Beneficiary:                                  | Surrender or refund<br>value: |
| If you somed No ☐ Yes.  33. Claims Examp No ☐ Yes.  34. Other ☐ No ☐ Yes.  35. Any fir ☐ No | are the beneficiary of one has died.  Give specific informations against third partie bles: Accidents, employees: Describe each claim | s, whether or not you have find the pyment disputes, insurance classimated claims of every nature | from a life in | nsurance policy, or are currently entitled to |                               |
|   |   | l of your entries from Part 4,<br>ber here  |                | any entries for pages you have attached       | \$25.00                       |
| Part 5: De  | scribe Anv Business-R   | elated Property You Own or Hav  | e an Interest  | In. List any real estate in Part 1.           |                               |
| 37. <b>Do you</b>   | <u> </u>  | or equitable interest in any busin  |                | · · · · · · · · · · · · · · · · · · ·         |                               |
|   |   | Commercial Fishing-Related Properties in farmland, list it in Part 1.                             | perty You Ow   | vn or Have an Interest In.                    |                               |
| ■ No.   | Jown or have any le<br>Go to Part 7.<br>Go to line 47.  | gal or equitable interest in a  | ny farm- or    | commercial fishing-related property?          |                               |
| Part 7:   | Describe All Property   | / You Own or Have an Interest in  | That You Di    | d Not List Above                              |                               |

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| •    | Do you have other property of any kind you did not already be Examples: Season tickets, country club membership No Yes. Give specific information | list?  |            |                        |       |            |
|------|---|--------|------------|------------------------|-------|------------|
| 54.  | Add the dollar value of all of your entries from Part 7. Write  | that n | umber here |                        |       | \$0.00     |
| Part | 8: List the Totals of Each Part of this Form  |        |            |                        |       |            |
| 55.  | Part 1: Total real estate, line 2   |        |            |                        |       | \$0.00     |
| 56.  | Part 2: Total vehicles, line 5  |        | \$0.00     |                        |       |            |
| 57.  | Part 3: Total personal and household items, line 15   |        | \$1,400.00 |                        |       |            |
| 58.  | Part 4: Total financial assets, line 36   |        | \$25.00    |                        |       |            |
| 59.  | Part 5: Total business-related property, line 45  |        | \$0.00     |                        |       |            |
| 60.  | Part 6: Total farm- and fishing-related property, line 52   | -      | \$0.00     |                        |       |            |
| 61.  | Part 7: Total other property not listed, line 54  | +      | \$0.00     |                        |       |            |
| 62.  | Total personal property. Add lines 56 through 61  |        | \$1,425.00 | Copy personal property | total | \$1,425.00 |
| 63.  | Total of all property on Schedule A/B. Add line 55 + line 62  |        |            |                        |       | \$1,425.00 |

Official Form 106A/B Schedule A/B: Property page 5

|                   |                |  | Docume                     | <u>ent F</u> | Page 15 of 46  | _                  |                                       |
|-------------------|----------------|--|----------------------------|--------------|--|--------------------|---------------------------------------|
| Fill in 1         | this inforr    | nation to identify your                              | case:                      |              |  |                    |                                       |
| Debtor            | r 1            | Ethel L. Fort  |                            |              |  |                    |                                       |
|                   |                | First Name   | Middle Name                | L            | ast Name   |                    |                                       |
| Debtor<br>(Spouse |                | First Name   | Middle Name                | L            | ast Name   |                    |                                       |
|                   |                | nkruntov Court for the                               | NORTHERN DISTRICT          | OF ILLINI    | OIS.   |                    |                                       |
| Officea           | States Da      | nkruptcy Court for the:                              | NORTHERN DISTRICT          | OF ILLIN     | 013  |                    |                                       |
| Case r            | number _       |  |                            |              |  |                    | N. 1 1641 1                           |
| (II KIIOWII       | ')             |  |                            |              |  | . –                | Check if this is an<br>Imended filing |
|                   |                |  |                            |              |  | _                  | g                                     |
| Offic             | <u>cial Fo</u> | <u>rm 106C</u>                                       |                            |              |  |                    |                                       |
| Sch               | redul          | e C: The Pro   | operty You C               | Claim        | as Exempt  |                    | 4/16                                  |
|                   |                |  |                            |              | •  |                    |                                       |
|                   |                |  |                            |              | ther, both are equally responsible for                                       |                    |                                       |
|                   |                |  |                            |              | our source, list the property that you<br>ge as necessary. On the top of any |                    |                                       |
| ase nu            | umber (if kr   | nown).   |                            |              |  |                    | •                                     |
|                   |                |  |                            |              | ount of the exemption you claim.   |                    |                                       |
|                   |                |  |                            |              | ir market value of the property be<br>th aids, rights to receive certain b   |                    |                                       |
| unds-             | -may be u      | nlimited in dollar amou                              | unt. However, if you clair | n an exen    | nption of 100% of fair market valu   | ue under a law     | that limits the                       |
|                   |                | articular dollar amount<br>statutory amount.         | t and the value of the pro | perty is d   | letermined to exceed that amoun  | it, your exemp     | tion would be limited                 |
|                   | <u> </u>       | •  | im as Evenut               |              |  |                    |                                       |
| Part 1:           |                | y the Property You Cla                               | •                          |              |  |                    |                                       |
| 1. Wł             | nich set of    | exemptions are you c                                 | laiming? Check one only,   | even if yo   | our spouse is filing with you.   |                    |                                       |
|                   | You are cl     | aiming state and federal                             | nonbankruptcy exemption    | ns. 11 U.S   | S.C. § 522(b)(3)   |                    |                                       |
|                   | You are cl     | aiming federal exemption                             | ns. 11 U.S.C. § 522(b)(2)  |              |  |                    |                                       |
| 2. <b>Fo</b>      | r any prop     | erty you list on Sched                               | ule A/B that you claim as  | s exempt,    | fill in the information below.   |                    |                                       |
|                   |                | on of the property and line that lists this property | e on Current value of t    | the Amo      | ount of the exemption you claim  | Specific laws      | that allow exemption                  |
|                   |                |  | Copy the value from        | m <i>Che</i> | eck only one box for each exemption.   |                    |                                       |
|                   |                |  | Schedule A/B               |              |  | <b>705 !! 00 5</b> | (40.4004(1))                          |
|                   |                | hold goods and furnis<br>hedule A/B: 6.1             | shings \$700.0             | 00           | \$700.00   | 735 ILCS 5         | 5/12-1001(b)                          |
|                   | .0 00.         | 70da10 7 ( D. 0. 1                                   |                            |              | 100% of fair market value, up to   |                    |                                       |
|                   |                |  |                            |              | any applicable statutory limit   |                    |                                       |
| Clo               | othing and     | d personal items                                     | <b>#</b> 400.4             | 20 =         | ¢400.00  | 735 ILCS 5         | 5/12-1001(a)                          |
|                   | •              | nedule A/B: 11.1                                     | \$400.0                    |              | \$400.00   |                    | ,                                     |
|                   |                |  |                            |              | 100% of fair market value, up to   |                    |                                       |
|                   |                |  |                            |              | any applicable statutory limit   |                    |                                       |
| 3 Ar              | e vou claii    | ming a homestead exe                                 | mption of more than \$16   | 0.375?       |  |                    |                                       |
|                   | •              | •  |                            | •            | led on or after the date of adjustme   | nt.)               |                                       |
|                   | No             |  |                            |              |  |                    |                                       |
|                   | Yes. Dic       | I you acquire the propert                            | y covered by the exemption | on within 1  | ,215 days before you filed this case   | ?                  |                                       |
|                   | □ N            | 0  |                            |              |  |                    |                                       |
|                   | □ Y            | es   |                            |              |  |                    |                                       |

| Fill in this inform                     |               |                   |             |   |                     |
|---|---------------|-------------------|-------------|---|---------------------|
| Debtor 1                                | Ethel L. Fort |                   |             |   |                     |
|   | First Name    | Middle Name       | Last Name   | · |                     |
| Debtor 2                                |               |                   |             |   |                     |
| (Spouse if, filing)                     | First Name    | Middle Name       | Last Name   |   |                     |
| United States Bankruptcy Court for the: |               | NORTHERN DISTRICT | OF ILLINOIS |   |                     |
| Case number                             |               |                   |             |   |                     |
| (if known)                              |               |                   |             |   | Check if this is an |
|   |               |                   |             |   | amended filing      |

### Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

|  |  | Document   | Page 17 of 46  |  |
|--|--|--|--|--|
| Fill in this in  | formation to identify your   | case:  |  |  |
| Debtor 1   | Ethel L. Fort  |  |  |  |
|  | First Name   | Middle Name  | Last Name  |  |
| Debtor 2<br>(Spouse if, filing)  | First Name   | Middle Name  | Last Name  |  |
| United States  | Bankruptcy Court for the:  | NORTHERN DISTRICT OF IL  | LINOIS   |  |
| Case number  | ·  |  |  | Check if this is an amended filing   |
| Schedule   |  | ho Have Unsecured  |  | 12/15  |
| any executory<br>Schedule G: E:<br>Schedule D: Cr<br>left. Attach the<br>name and case | contracts or unexpired leases<br>secutory Contracts and Unexp<br>editors Who Have Claims Sec<br>Continuation Page to this page<br>number (if known). | that could result in a claim. Also I<br>ired Leases (Official Form 106G). I<br>ured by Property. If more space is<br>e. If you have no information to re | FY claims and Part 2 for creditors with NONPRIORITY claist executory contracts on Schedule A/B: Property (Offi Do not include any creditors with partially secured claim needed, copy the Part you need, fill it out, number the eport in a Part, do not file that Part. On the top of any add | cial Form 106A/B) and on<br>ns that are listed in<br>entries in the boxes on the |
|  | st All of Your PRIORITY Un   |  |  |  |
| _ `  | editors have priority unsecure   | d claims against you?  |  |  |
| No. Go   | to Part 2.   |  |  |  |
| ☐ Yes.   |  |  |  |  |
|  | st All of Your NONPRIORIT  |  |  |  |
| 3. Do any cr   | editors have nonpriority unsec   | ured claims against you?   |  |  |
| ☐ No. Yo   | u have nothing to report in this p   | art. Submit this form to the court with  | your other schedules.  |  |
| Yes.   |  |  |  |  |
| 4. List all of unsecured   | claim, list the creditor separately  | for each claim. For each claim listed  | ne creditor who holds each claim. If a creditor has more the distribution of the claim it is. Do not list claims already in have more than three nonpriority unsecured claims fill out the   | ncluded in Part 1. If more   |
|  |  |  |  | Total claim  |
| 4.1 Blue   | Cross BlueShield of Illino   | is Last 4 digits of acc  | count number   | \$517.01   |
| P.O.   | riority Creditor's Name Box 3239   | When was the deb   | t incurred?  |  |
| Numb   | erville, IL 60566-7240<br>er Street City State Zlp Code  | As of the date you   | file, the claim is: Check all that apply   |  |
|  | incurred the debt? Check one.  | _  |  |  |
|  | ebtor 1 only   | ☐ Contingent   |  |  |
|  | ebtor 2 only   | Unliquidated   |  |  |
|  | ebtor 1 and Debtor 2 only  | ☐ Disputed   | DITY Labele  |  |
|  | least one of the debtors and and   |  | RITY unsecured claim:  |  |
| ☐ CI<br>debt   | neck if this claim is for a comr   |  |  |  |
|  | claim subject to offset?   | ☐ Obligations arising report as priority clai  | ng out of a separation agreement or divorce that you did not<br>ims  |  |
| ■ No   | •  |  | n or profit-sharing plans, and other similar debts   |  |
| ☐ Ye   | es   | Other. Specify   | premiums   |  |

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| Debio | Etnei L. Fort  | Case number (if know)  |                |
|-------|--|--|----------------|
| 4.2   | Capital One  | Last 4 digits of account number 9519   | \$2,564.94     |
|       | Nonpriority Creditor's Name P.O. Box 30285                       | When was the debt incurred?  |                |
|       | Salt Lake City, UT 84130-0285  Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply  |                |
|       | Who incurred the debt? Check one.                                | As of the date you me, the claim is. Check all that apply  |                |
|       | Debtor 1 only  | ☐ Contingent   |                |
|       | Debtor 2 only  | ☐ Unliquidated   |                |
|       | ☐ Debtor 1 and Debtor 2 only                                     | ☐ Disputed   |                |
|       | ☐ At least one of the debtors and another                        | Type of NONPRIORITY unsecured claim:   |                |
|       | ☐ Check if this claim is for a community                         | ☐ Student loans  |                |
|       | debt Is the claim subject to offset?                             | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims |                |
|       | ■ No   | Debts to pension or profit-sharing plans, and other similar debts  |                |
|       | ☐ Yes  | Other. Specify misc. charges   |                |
| 4.3   | Capital One Bank   | Last 4 digits of account number  | \$2,561.94     |
|       | Nonpriority Creditor's Name                                      |  | <del>+-,</del> |
|       | c/o Blatt Hasenmiller et al<br>211 Landmark Drive, Suite C1      | When was the debt incurred?  |                |
|       | Normal, IL 61761-2160  |  |                |
|       | Number Street City State Zlp Code                                | As of the date you file, the claim is: Check all that apply  |                |
|       | Who incurred the debt? Check one.                                |  |                |
|       | Debtor 1 only  | ☐ Contingent   |                |
|       | Debtor 2 only  | ☐ Unliquidated   |                |
|       | ☐ Debtor 1 and Debtor 2 only                                     | ☐ Disputed   |                |
|       | $\square$ At least one of the debtors and another                | Type of NONPRIORITY unsecured claim:   |                |
|       | ☐ Check if this claim is for a community                         | ☐ Student loans  |                |
|       | debt<br>Is the claim subject to offset?                          | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims |                |
|       | ■ No   | lacktriangle Debts to pension or profit-sharing plans, and other similar debts                           |                |
|       | Yes  | ■ Other. Specify 2016 SC 1069  |                |
| 4.4   | Dennis Brebner & Associates                                      | Last 4 digits of account number  | \$5,797.68     |
|       | Nonpriority Creditor's Name<br>860 Northpoint Blvd.              | When was the debt incurred?  |                |
|       | Waukegan, IL 60085-8211  Number Street City State Zlp Code       | As of the date you file, the claim is: Check all that apply  |                |
|       | Who incurred the debt? Check one.                                |  |                |
|       | ■ Debtor 1 only  | Contingent   |                |
|       | Debtor 2 only  | ☐ Unliquidated   |                |
|       | Debtor 1 and Debtor 2 only                                       | Disputed   |                |
|       | ☐ At least one of the debtors and another                        | Type of NONPRIORITY unsecured claim:   |                |
|       | ☐ Check if this claim is for a community                         | ☐ Student loans  |                |
|       | debt Is the claim subject to offset?                             | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims |                |
|       | No   | □ Debts to pension or profit-sharing plans, and other similar debts                                      |                |
|       | — 110  | _ collections for Swedish American Hospital,   |                |
|       | □Yes   | Other. Specify and other misc. accounts  |                |

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| Debtor 1 Ethel L. Fort  | Case number (if know)   |            |  |  |  |
|---|---|------------|--|--|--|
| 4.5 Phillips & Cohen Associates Nonpriority Creditor's Name         | Last 4 digits of account number   | \$2,889.37 |  |  |  |
| P.O. Box 5790<br>Hauppauge, NY 11788-0164                           | When was the debt incurred?   |            |  |  |  |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply   |            |  |  |  |
| Debtor 1 only   | ☐ Contingent  |            |  |  |  |
| ☐ Debtor 2 only   | ☐ Unliquidated  |            |  |  |  |
| ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |            |  |  |  |
| $\square$ At least one of the debtors and another                   | Type of NONPRIORITY unsecured claim:  |            |  |  |  |
| ☐ Check if this claim is for a community                            | ☐ Student loans   |            |  |  |  |
| debt<br>Is the claim subject to offset?                             | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |  |  |  |
| ■ No  | lacktriangle Debts to pension or profit-sharing plans, and other similar debts                            |            |  |  |  |
| Yes   | ■ Other. Specify accounts Collections for Merrick Bank, and other misc.                                   |            |  |  |  |

### Part 3: List Others to Be Notified About a Debt That You Already Listed

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|                       |     |   |     |     | Total Claim |
|-----------------------|-----|---|-----|-----|-------------|
|                       | 6a. | Domestic support obligations  | 6a. | \$  | 0.00        |
| Total                 |     |   |     | · · |             |
| claims<br>from Part 1 | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$  | 0.00        |
|                       | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$  | 0.00        |
|                       | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$  | 0.00        |
|                       | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$  | 0.00        |
|                       | 04  | Otrodont Loans  | Ct. |     | Total Claim |
| Total                 | 6f. | Student loans   | 6f. | \$  | 0.00        |
| claims                |     |   |     |     |             |
| from Part 2           | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$  | 0.00        |
|                       | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$  | 0.00        |
|                       | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$  | 14,330.94   |
|                       | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | \$  | 14,330.94   |

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

|   |                         | 170.611111        | 111 FAUE / U U 40 |  |
|---|-------------------------|-------------------|-------------------|--|
| Fill in this infor                      | mation to identify your | case:             |                   |  |
| Debtor 1                                | Ethel L. Fort           |                   |                   |  |
| I                                       | First Name              | Middle Name       | Last Name         |  |
| Debtor 2                                |                         |                   |                   |  |
| (Spouse if, filing)                     | First Name              | Middle Name       | Last Name         |  |
| United States Bankruptcy Court for the: |                         | NORTHERN DISTRICT | OF ILLINOIS       |  |
| Case number                             |                         |                   |                   |  |
| (if known)                              |                         |                   |                   |  |
|   |                         |                   |                   |  |

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | r company with<br>Name, Number | h whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------------------------|---|-------------------|---|
| 2.1 |           |                                |   |                   |   |
|     | Name      |                                |   |                   | _                                       |
|     | Number    | Street                         |   |                   |   |
|     | City      |                                | State   | ZIP Code          | _                                       |
| 2.2 |           |                                |   |                   |   |
|     | Name      |                                |   |                   | _                                       |
|     | Number    | Street                         |   |                   | _                                       |
|     | City      |                                | State   | ZIP Code          |   |
| 2.3 | •         |                                |   |                   |   |
|     | Name      |                                |   |                   | _                                       |
|     | Number    | Street                         |   |                   | _                                       |
|     | City      |                                | State   | ZIP Code          | <del>_</del>                            |
| 2.4 | •         |                                |   |                   |   |
|     | Name      |                                |   |                   | _                                       |
|     | Number    | Street                         |   |                   | _                                       |
|     | City      |                                | State   | ZIP Code          | <del></del>                             |
| 2.5 |           |                                |   |                   |   |
|     | Name      |                                |   |                   | _                                       |
|     | Number    | Street                         |   |                   | _                                       |
|     | City      |                                | State   | ZIP Code          | <del>_</del>                            |
|     |           |                                |   |                   |   |

|                               |  | Docume  | ent Page 21 d                                      | )T 4h                                   |   |
|-------------------------------|--|---|--|---|---|
| Fill in this                  | information to identify your                                       |   |  |   |   |
| Debtor 1                      | Ethel L. Fort  |   |  |   |   |
|                               | First Name   | Middle Name   | Last Name  |   |   |
| Debtor 2<br>(Spouse if, filir | ng) First Name   | Middle Name   | Last Name  |   |   |
|                               | tes Bankruptcy Court for the:                                      | NORTHERN DISTRICT                                     | OF ILLINOIS  |   |   |
| Offica Ota                    | tes bankruptey court for the.                                      | HORTIERR BIOTRIO                                      | OT ILLINOIS  |   |   |
| Case numb<br>(if known)       | ber  |   |  |   | ☐ Check if this is an amended filing  |
|                               | l Form 106H<br>Iule H: Your Cod                                    | ebtors  |  |   | 12/15   |
| people are<br>fill it out, a  | filing together, both are equ                                      | ally responsible for supple boxes on the left. Attacl | olying correct informat<br>n the Additional Page t | ion. If more space is n                 | ate as possible. If two married<br>leeded, copy the Additional Page,<br>p of any Additional Pages, write        |
| 1. Do                         | you have any codebtors? (If  | you are filing a joint case,                          | do not list either spouse                          | as a codebtor.                          |   |
| ■ No<br>□ Yes                 | s  |   |  |   |   |
|                               | hin the last 8 years, have you<br>a, California, Idaho, Louisiana  |   |  |   |   |
|                               | Go to line 3.  Did your spouse, former spo                         | use, or legal equivalent live                         | e with you at the time?                            |   |   |
| in line<br>Form               | 2 again as a codebtor only   | if that person is a guaran                            | tor or cosigner. Make                              | sure you have listed th                 | g with you. List the person shown<br>ne creditor on Schedule D (Official<br>Schedule E/F, or Schedule G to fill |
|                               | Column 1: Your codebtor<br>Name, Number, Street, City, State and Z | IP Code   |  | Column 2: The cre<br>Check all schedule | editor to whom you owe the debt<br>es that apply:   |
| 3.1                           |  |   |  | ☐ Schedule D. lin                       | e   |
|                               | Name   |   |  | ☐ Schedule E/F, I                       |   |
|                               |  |   |  | ☐ Schedule G, lin                       | e   |
|                               | Number Street<br>City  | State   | ZIP Code   | _                                       |   |
| 22                            |  |   |  | □ Cabadula D lia                        |   |
| 3.2                           | Name   |   |  | _ ☐ Schedule D, lin☐ Schedule E/F, I    |   |
|                               |  |   |  | ☐ Schedule G, lin                       |   |
| -                             | Number Street  |   |  | _                                       |   |
|                               | City   | State   | ZIP Code   |   |   |

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| Eill           | in this information to identify your c  | ace:   |  |                        |               | 1   |  |                                     |                                      |
|----------------|---|--|--|------------------------|---------------|---|--|-------------------------------------|--------------------------------------|
|                | otor 1 Ethel L. Fort  |  |  |                        |               |   |  |                                     |                                      |
|                | otor 2  ouse, if filing)  |  |  |                        | _             |   |  |                                     |                                      |
| Uni            | ted States Bankruptcy Court for the   | : NORTHERN DISTRIC   | CT OF ILLINOIS                             |                        |               |   |  |                                     |                                      |
| O Be a sup spo | fficial Form 1061  chedule I: Your Inc as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form. | sible. If two married pec<br>are married and not fili<br>ir spouse is not filing w | ng jointly, and your ith you, do not inclu | spouse i<br>ide infori | s liv<br>nati | MM / DD/ \frac{\text{MM / DD/ \text{N}}}{and Debtor 2), boing with you, inclon about your spectrum. | ed filing ent showing p as of the folk  YYYY  th are equal ude informa ouse. If more | lly responsition about e space is i | 12/15<br>ible for<br>your<br>needed, |
|                | t 1: Describe Employment  | on the top of any additi   | onai pages, write y                        | Jui mame               | anc           | r case number (ii   | Kilowiij. Alis   | Swei every                          | question                             |
| 1.             | Fill in your employment information.  |  | Debtor 1                                   |                        |               | Debtor :  | 2 or non-filin   | ng spouse                           |                                      |
|                | If you have more than one job, attach a separate page with information about additional employers.  | Employment status  | ☐ Employed ■ Not employed                  |                        |               | □ Empl  | oyed<br>mployed  |                                     |                                      |
|                | Include part-time, seasonal, or self-employed work.   | Occupation Employer's name   |  |                        |               |   |  |                                     |                                      |
|                | Occupation may include student or homemaker, if it applies.   | Employer's address   |  |                        |               |   |  |                                     |                                      |
|                |   | How long employed t  | here?                                      |                        |               |   |  |                                     |                                      |
| Par            | Give Details About Mo   | nthly Income   |  |                        |               |   |  |                                     |                                      |
|                | mate monthly income as of the duse unless you are separated.  | ate you file this form. If   | you have nothing to r                      | eport for              | any           | line, write \$0 in the  | space. Inclu   | de your nor                         | n-filing                             |
| -              | u or your non-filing spouse have me<br>e space, attach a separate sheet to  |  | ombine the information                     | on for all e           | emplo         | oyers for that perso  | on on the line   | es below. If y                      | ou need                              |
|                |   |  |  |                        |               | For Debtor 1  | For Debto  |                                     |                                      |
| 2.             | List monthly gross wages, sala deductions). If not paid monthly,  |  |  | 2.                     | \$            | 0.00  | \$   | N/A                                 |                                      |
| 3.             | Estimate and list monthly over  | ime pay.   |  | 3.                     | +\$           | 0.00  | +\$  | N/A                                 |                                      |
| 4.             | Calculate gross Income. Add li  | ne 2 + line 3.   |  | 4.                     | \$            | 0.00  | \$   | N/A                                 |                                      |

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| Deb | tor 1                 | Ethel L. Fort  |                        | Ca   | ase number ( <i>if kn</i>               | own)     |            |                    |               |        |
|-----|-----------------------|--|------------------------|------|---|----------|------------|--------------------|---------------|--------|
|     |                       |  |                        | ı    | For Debtor 1                            |          |            | Debtor<br>filing s | 2 or<br>pouse |        |
|     | Cop                   | y line 4 here  | 4.                     | -    | 50                                      | .00      | \$         |                    | N/A           |        |
| 5.  | List                  | all payroll deductions:  |                        |      |   |          |            |                    |               |        |
|     | 5a.                   | Tax, Medicare, and Social Security deductions  | 5a                     |      |   | .00      | \$         |                    | N/A           |        |
|     | 5b.                   | Mandatory contributions for retirement plans   | 5b                     |      |   | .00      | \$         |                    | N/A           |        |
|     | 5c.                   | Voluntary contributions for retirement plans   | 5c                     |      | ·                                       | .00      | \$         |                    | N/A           |        |
|     | 5d.                   | Required repayments of retirement fund loans   | 5d                     |      | ·                                       | .00      | \$         |                    | N/A           |        |
|     | 5e.                   | Insurance  | 5e                     |      | . — — — — — — — — — — — — — — — — — — — | .00      | \$         |                    | N/A           |        |
|     | 5f.                   | Domestic support obligations   | 5f.                    |      | ·                                       | .00      | \$         |                    | N/A           |        |
|     | 5g.                   | Union dues   | 5g                     |      | ·                                       | .00      | \$         |                    | N/A           |        |
|     | 5h.                   | Other deductions. Specify:   | 5h                     | .+ 3 |   | .00      | + \$       |                    | N/A           |        |
| 6.  | Add                   | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.   | 6.                     | \$   | 50                                      | .00      | \$         |                    | N/A           |        |
| 7.  | Cal                   | culate total monthly take-home pay. Subtract line 6 from line 4.   | 7.                     | \$   | 50                                      | .00      | \$         |                    | N/A           |        |
| 8.  | List<br>8a.           | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total                      |                        |      |   |          |            |                    |               |        |
|     |                       | monthly net income.  | 8a                     |      |   | .00      | \$         |                    | N/A           |        |
|     | 8b.                   | Interest and dividends   | 8b                     | . :  | §0                                      | .00      | \$         |                    | N/A           |        |
|     | 8c.<br>8d.            | Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation   | 1 <b>t</b><br>8c<br>8d |      |   | .00      | \$         |                    | N/A<br>N/A    |        |
|     | 8e.                   | Social Security  | 8e                     |      | ·                                       | .00      | \$         |                    | N/A           |        |
|     | 8f.                   | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: S.N.A.P | ce<br>8f.              | . (  | § 194                                   | .00      | \$         |                    | N/A           |        |
|     | 8g.                   | Pension or retirement income   | 8g                     |      | ·                                       | .00      | , <b>*</b> |                    | N/A           |        |
|     | 8h.                   | Other monthly income. Specify:   | 8h                     | .+ : | <u> </u>                                | .00      | + 5        |                    | N/A           |        |
| 9.  | Add                   | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   | 9.                     | \$   | 194                                     | .00      | \$         |                    | N/A           |        |
| 10  | Cal                   | culate monthly income. Add line 7 + line 9.  | 10.                    | Φ.   | 194.00                                  | T 6      |            | N/A                | _ @           | 194.00 |
| 10. |                       | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   | 10.                    | Ψ    | 194.00                                  | <b>Τ</b> |            | IN/A               | - U -         | 194.00 |
| 11. | Incli<br>othe<br>Do i | te all other regular contributions to the expenses that you list in Schedul ade contributions from an unmarried partner, members of your household, your friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are no cify:            | ur depe                |      |   |          |            | chedule<br>11.     |               | 0.00   |
| 12. |                       | I the amount in the last column of line 10 to the amount in line 11. The ree that amount on the Summary of Schedules and Statistical Summary of Certilies  |                        |      |   |          |            | 12.                | \$            | 194.00 |
|     |                       |  |                        |      |   |          |            | l                  | Combine       |        |
| 13. | Do :                  | you expect an increase or decrease within the year after you file this form No. Yes Explain:   | m?                     |      |   |          |            |                    |               |        |

Official Form 106I Schedule I: Your Income page 2

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| 7111       | in this information to identify your case:  |  |                            |  |  |
|------------|---|--|----------------------------|--|--|
| Deb        | ettel L. Fort   |  | Chec                       | ck if this is:                           |  |
| Dah        | stor 2  |  | _                          | An amended filing                        | ilaa maataatitiaa ahaataa                            |
|            | ouse, if filing)  |  |                            | A supplement snow 13 expenses as of      | ving postpetition chapter the following date:        |
| (Opc       | 5656, ii iiiiig)  |  |                            | To expended as of                        | and following date.                                  |
| Unit       | ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS  | S  | -                          | MM / DD / YYYY                           |  |
| Cas        | se number   |  |                            |  |  |
| (If kı     | (nown)  |  |                            |  |  |
| Of         | fficial Form 106J   |  |                            |  |  |
|            | chedule J: Your Expenses  |  |                            |  | 12/15  |
| Be info    | as complete and accurate as possible. If two married people are formation. If more space is needed, attach another sheet to this formber (if known). Answer every question.           |  |                            |  |  |
|            | t 1: Describe Your Household  |  |                            |  |  |
| 1.         | Is this a joint case?   |  |                            |  |  |
|            | No. Go to line 2.   |  |                            |  |  |
|            | ☐ Yes. Does Debtor 2 live in a separate household?  |  |                            |  |  |
|            | □ No  |  |                            |  |  |
|            | ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses fo   | r Separate House                               | hold of Deb                | tor 2.                                   |  |
| 2.         | Do you have dependents? ■ No  |  |                            |  |  |
|            | Do not list Debtor 1 and Debtor 2.  Fill out this information for each dependent  | Dependent's relation Debtor 1 or Debtor        |                            | Dependent's age                          | Does dependent live with you?                        |
|            | Do not state the  |  |                            |  | □ No   |
|            | dependents names.   |  |                            |  | ☐ Yes  |
|            |   |  |                            |  | □ No   |
|            | -   |  |                            |  | Yes  |
|            |   |  |                            |  | □ No   |
|            | -   |  |                            |  | ☐ Yes  |
|            |   |  |                            |  | □ No   |
| 3.         | Do your expenses include  |  |                            |  | ☐ Yes  |
| Э.         | expenses of people other than yourself and your dependents?   |  |                            |  |  |
|            | yoursen and your dependents:  |  |                            |  |  |
| Est<br>exp | t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless you benses as of a date after the bankruptcy is filed. If this is a supplei | ı are using this fo<br>mental <i>Schedul</i> e | orm as a su<br>J, check th | pplement in a Cha<br>e box at the top of | pter 13 case to report<br>f the form and fill in the |
| app        | plicable date.  |  |                            |  |  |
| the        | lude expenses paid for with non-cash government assistance if you value of such assistance and have included it on Schedule I: You  |  |                            | v  |  |
| (Off       | ficial Form 106I.)  |  |                            | Your expe                                | enses  |
| 4.         | The rental or home ownership expenses for your residence. Incl payments and any rent for the ground or lot.   | ude first mortgage                             | 4. \$                      | i  | 400.00   |
|            | If not included in line 4:  |  |                            |  |  |
|            | 4a. Real estate taxes   |  | 4a. \$                     | ;  | 0.00   |
|            | 4b. Property, homeowner's, or renter's insurance  |  | 4b. \$                     | <u> </u>                                 | 0.00   |
|            | 4c. Home maintenance, repair, and upkeep expenses   |  | 4c. \$                     |  | 0.00   |
| _          | 4d. Homeowner's association or condominium dues   |  | 4d. \$                     |  | 0.00   |
| 5.         | Additional mortgage payments for your residence, such as home   | equity loans                                   | 5. \$                      | 1  | 0.00   |

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| Case r                                | numl  | ber (if known)  |  |
|---------------------------------------|---|---|--|
|                                       |   |   |  |
| (                                     | 6a.   | \$  | 125.00   |
|                                       |   | · · · — — — — — — — — — — — — — — — — —   | 0.00   |
|                                       |   |   | 0.00   |
|                                       |   |   | 0.00   |
|                                       |   | · ·   | 200.00   |
|                                       |   |   | 0.00   |
|                                       |   |   |  |
|                                       |   |   | 50.00  |
|                                       |   |   | 50.00  |
|                                       | 11.   | <b>&gt;</b>   | 100.00   |
|                                       | 12  | \$  | 200.00   |
|                                       |   | ·   | 0.00   |
| =                                     |   | ·   |  |
| ions                                  | 14.   | <b>&gt;</b>   | 0.00   |
| over in alcohold in lines A on OO     |   |   |  |
|                                       | <b>5</b> 0  | ¢   | 0.00   |
|                                       |   | ·   | 0.00   |
|                                       |   | · · · · · · · · · · · · · · · · · · ·   | 0.00   |
|                                       |   | ·   | 0.00   |
|                                       | 5d.   | \$  | 0.00   |
|                                       |   | •   |  |
|                                       | 16.   | \$  | 0.00   |
|                                       | _   | •   |  |
|                                       |   | ·   | 0.00   |
|                                       |   | ·   | 0.00   |
|                                       |   |   | 0.00   |
|                                       | 7d.   | \$  | 0.00   |
|                                       |   | •   | 0.00   |
| i, rour moome (Omour roun room.       | 18.   | ·   | 0.00   |
|                                       |   | \$  | 0.00   |
|                                       |   |   |  |
|                                       |   |   |  |
| 20                                    | 0a.   | \$  | 0.00   |
| 20                                    | 0b.   | \$  | 0.00   |
| ince 2                                | 0c.   | \$  | 0.00   |
| es 20                                 | 0d.   | \$  | 0.00   |
| n dues 20                             | 0e.   | \$  | 0.00   |
| :                                     | 21.   | +\$   | 0.00   |
|                                       |   |   | 0.00   |
|                                       |   |   |  |
|                                       |   | \$  | 1,125.00   |
| 2), if any, from Official Form 106J-2 |   | \$  | _  |
| nonthly expenses.                     |   | \$  | 1,125.00   |
| y - 1                                 |   | · —   | 1,120.00   |
|                                       |   |   |  |
| ome) from Schedule I. 23              | 3а.   | \$  | 194.00   |
| c above. 23                           | 3b.   | -\$   | 1,125.00   |
|                                       |   |   | · · · · · · · · · · · · · · · · · · ·  |
| ır monthly income.                    |   |   | 004.00   |
| 2                                     | Зс.   | \$  | -931.00  |
|                                       |   |   | se or decrease because of  |
| ant and utilities for their mether    |   |   |  |
| ent and utilities for their mother.   |   |   |  |
|                                       | and cable services  s or train fare.  rs, magazines, and books tions  ay or included in lines 4 or 20.  1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | and cable services  6a. 6b. 6c. 6d. 7. 8. 9. 10. 11. s or train fare. 12. rs, magazines, and books 13. tions 14. 15b. 15c. 15d. 17a. 17b. 17c. 17d. 17d. 17d. 17d. 17d. 17d. 17d. 17d | 6d. \$ 7. \$ 8. \$ 9. \$ 10. \$ 11. \$ 11. \$ 11. \$ 12. \$ 13. \$ 14. \$ 15b. \$ 15c. \$ 15d. \$ 17a. \$ 17b. \$ 17c. \$ 17d. \$ 17 |

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| Fill in this info                | ormation to identify your   | case:                    |                              |  |                                     |
|----------------------------------|-----------------------------|--------------------------|------------------------------|--|-------------------------------------|
| Debtor 1                         | Ethel L. Fort               | Middle Name              | Loot Nome                    |  |                                     |
| Debtor 2                         | First Name                  | Middle Name              | Last Name                    |  |                                     |
| (Spouse if, filing)              | First Name                  | Middle Name              | Last Name                    |  |                                     |
| United States                    | Bankruptcy Court for the:   | NORTHERN DISTRICT        | OF ILLINOIS                  |  |                                     |
| Case number                      |                             |                          |                              |  |                                     |
| (if known)                       |                             |                          |                              | _  | heck if this is an<br>mended filing |
| Official Fo                      | rm 106Dec                   |                          |                              |  |                                     |
|                                  |                             | an Individual            | Debtor's Sch                 | hedules  | 12/15                               |
|                                  |                             |                          |                              |  |                                     |
| obtaining mon<br>rears, or both. |                             | n connection with a bank |                              | Making a false statement, conce<br>n fines up to \$250,000, or imprise |                                     |
| ا Did you                        | pay or agree to pay some    | eone who is NOT an attor | rney to help you fill out ba | ankruptcy forms?   |                                     |
| ■ No                             |                             |                          |                              |  |                                     |
| ☐ Yes.                           | . Name of person            |                          |                              | Attach Bankruptcy Petitit<br>Declaration, and Signatu                  |                                     |
|                                  | nalty of periury. I declare | that I have read the sum |                              |  | ,                                   |
|                                  | are true and correct.       |                          | nmary and schedules filed    | l with this declaration and  |                                     |
| that they                        |                             |                          | X                            |  |                                     |
| that they a  X /s/ Et  Ethel     | are true and correct.       |                          |                              |  |                                     |

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| -                 | l in this inform           | nation to identify you                                 | r case:   |   |   |   |
|-------------------|----------------------------|--|---|---|---|---|
|                   |                            |  | Case.   |   |   |   |
| De                | btor 1                     | Ethel L. Fort First Name                               | Middle Name   | Last Name   |   |   |
|                   | btor 2<br>ouse if, filing) | First Name   | Middle Name   | Last Name   |   |   |
| Un                | ited States Ba             | nkruptcy Court for the:                                | NORTHERN DISTRICT (                                     | OF ILLINOIS   |   |   |
|                   | se number _                |  |   |   | _   | theck if this is an mended filing                     |
| St<br>Be<br>info  | as complete a              | of Financial and accurate as possione space is needed, | ble. If two married people a attach a separate sheet to |   | ankruptcy<br>equally responsible for sup<br>additional pages, write you |   |
|                   |                            | n). Answer every que:<br>Details About Your Ma         | stion.<br>arital Status and Where You                   | ı Lived Before  |   |   |
| 1.                |                            | r current marital statu                                |   |   |   |   |
|                   | ☐ Married ■ Not mar        | rried  |   |   |   |   |
| 2.                | During the la              | ast 3 years, have you                                  | lived anywhere other than                               | where you live now?   |   |   |
|                   | ■ No □ Yes. Lis            | st all of the places you l                             | ived in the last 3 years. Do no                         | ot include where you live now   | :   |   |
|                   | Debtor 1 Pr                | ior Address:   | Dates Debtor 1 lived there                              | Debtor 2 Prior Ad   | dress:  | Dates Debtor 2<br>lived there                         |
| <b>3.</b><br>stat |                            |  |   |   | ity property state or territory<br>co, Texas, Washington and W          |   |
|                   | ■ No<br>□ Yes. Ma          | ake sure you fill out <i>Scl</i>                       | hedule H: Your Codebtors (O                             | fficial Form 106H).   |   |   |
| Pa                | rt 2 Explai                | in the Sources of You                                  | r Income  |   |   |   |
| 4.                | Fill in the tota           | al amount of income yo                                 | u received from all jobs and a                          | g a business during this yeall businesses, including parteting together, list it only once un |   | ndar years?   |
|                   | □ No ■ Yes. Fill           | I in the details.                                      |   |   |   |   |
|                   |                            |  | Debtor 1  |   | Debtor 2  |   |
|                   |                            |  | Sources of income<br>Check all that apply.              | Gross income<br>(before deductions and<br>exclusions)   | Sources of income<br>Check all that apply.                              | Gross income<br>(before deductions<br>and exclusions) |
|                   |                            | of current year until<br>d for bankruptcy:             | ■ Wages, commissions, bonuses, tips                     | \$0.00  | ☐ Wages, commissions, bonuses, tips                                     |   |
|                   |                            |  | ☐ Operating a business                                  |   | ☐ Operating a business  |   |

Official Form 107

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|           |  |  |  | Debtor 1                                  |  |  |  | Debtor 2   |                                     |   |    |
|-----------|--|--|--|---|--|--|--|--|-------------------------------------|---|----|
|           |  |  |  |   | of income<br>that apply.                                 |  | s income<br>e deductions and<br>sions)                     |  | of income<br>that apply.            | Gross income<br>(before deductions<br>and exclusions)   |    |
|           | r last calen<br>nuary 1 to                       | dar year:<br>December                                      | 31, 2015 )   | ■ Wages                                   | s, commissions,<br>tips                                  |  | \$0.00   | D □ Wages<br>bonuses,                                  | s, commissions<br>tips              | S,  |    |
|           |  |  |  | ☐ Opera                                   | ting a business  |  |  | ☐ Opera  | ting a busines                      | s   |    |
| <b>5.</b> | Include include and other winnings.  List each s | come regard<br>public bene<br>If you are fil<br>source and | dless of wheth<br>fit payments;<br>ing a joint cas<br>the gross inco | ner that inco<br>pensions; rose and you h |  | amples of<br>rest; divid<br>you receiv | other income are<br>ends; money coll<br>yed together, list | e alimony; child<br>lected from law<br>it only once un | vsuits; royalties<br>ider Debtor 1. | ial Security, unemploymers; and gambling and lotter   |    |
|           | ■ Yes.   | Fill in the de   | etails.  |   |  |  |  |  |                                     |   |    |
|           |  |  |  | Debtor 1<br>Sources of<br>Describe I      | of income<br>pelow.                                      | each                                   | s income from<br>source<br>e deductions and<br>sions)      | Describe   | of income                           | Gross income<br>(before deductions<br>and exclusions)   |    |
|           | r last calen<br>nuary 1 to                       | dar year:<br>December                                      | 31, 2015 )   | Unemplo<br>June                           | yment thru   |  | \$9,375.00   | )  |                                     |   |    |
|           |  |  |  |   |  |  |  |  |                                     |   |    |
| Par       | t 3: List  | Certain Pa   | yments You   | Made Befo                                 | ore You Filed for  | Bankrup                                | tcy  |  |                                     |   | _  |
| <b>.</b>  | Are either ☐ No.                                 | Neither D  | ebtor 1 nor [  | Debtor 2 ha                               | imarily consume<br>s primarily cons<br>amily, or househo | umer deb                               |  | ebts are defined                                       | d in 11 U.S.C.                      | § 101(8) as "incurred by a  | n  |
|           |  | During the No.   | 90 days before 5   | -   | for bankruptcy, d  | id you pa                              | any creditor a to  | otal of \$6,425*                                       | or more?                            |   |    |
|           |  | □ Yes  | List below   | each credito                              |  |  |  |  |                                     | and the total amount you<br>port and alimony. Also, do  |    |
|           |  | * Subject  | not include  | payments t                                | o an attorney for to<br>and every 3 year                 | his bankr                              | uptcy case.  |  |                                     | •   |    |
|           | Yes.   |  |  |   | e primarily consu<br>for bankruptcy, d                   |  |  | otal of \$600 or                                       | more?                               |   |    |
|           |  | ■ No.  | Go to line 7   | 7.  |  |  |  |  |                                     |   |    |
|           |  | □ Yes  | include pay  |   | omestic support of                                       |  |  |  |                                     | d that creditor. Do not not not not include payments to a                                     | ın |
|           | Creditor'  | s Name an  | d Address  |   | Dates of payme   | ent                                    | Total amount paid  | Amount still o   | •                                   | his payment for   |    |
| 7.        | Insiders in of which y                           | clude your i   | relatives; any<br>fficer, director                                   | general par<br>r, person in               | control, or owner  | any gene<br>of 20% or                  | eral partners; part<br>more of their voti                  | nerships of whing securities;                          | nich you are a q<br>and any mana    | insider?<br>general partner; corporation<br>ging agent, including one<br>as child support and |    |
|           | ■ No   |  |  |   |  |  |  |  |                                     |   |    |
|           |  |  | nents to an in   | isider.                                   | Deterrif   |  | Tatalan  | A  |                                     | an fan this :   |    |
|           | Insider's  | Name and   | Address  |   | Dates of payme   | ent                                    | Total amount paid  | Amount still o   |                                     | on for this payment   |    |

Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an page 2 page 2 Official Form 107

Case 16-81579 Doc 1 Filed 06/30/16 Entered 06/30/16 10:38:28 Desc Main Page 29 of 46 Case number (if known) Document Debtor 1 Ethel L. Fort insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. ☐ No Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Capital One Bank Suit to collect a Winnebago County Circuit Pending vs. Ethel L. Fort debt Court □ On appeal 2016 SC 1069 400 W. State Street □ Concluded Rockford, IL 61101 Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Date Value of the Describe the Property property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? П Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

per person

Address:

Describe the gifts

Value

☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600

Person to Whom You Gave the Gift and

Dates you gave

the gifts

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| 14. | Within 2 years before you filed for bank  ■ No □ Yes. Fill in the details for each gift or or   |                       |  | ns with a total | I value of more than                     | \$600 to any charity?    |
|-----|---|-----------------------|--|-----------------|--|--------------------------|
|     | Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo  | total                 | Describe what you contributed  |                 | Dates you contributed                    | Value                    |
| Par | t 6: List Certain Losses  |                       |  |                 |  |                          |
| 15. | Within 1 year before you filed for bankru or gambling?  | uptcy or              | since you filed for bankruptcy, did y                                      | ou lose anytl   | hing because of thef                     | t, fire, other disaste   |
|     | ■ No □ Yes. Fill in the details.  |                       |  |                 |  |                          |
|     | Describe the property you lost and how the loss occurred  | Include               | the amount that insurance has paid. Loc claims on line 33 of Schedule A/B: | ist pending     | Date of your loss                        | Value of property<br>los |
| Par | t 7: List Certain Payments or Transfer  | 'S                    |  |                 |  |                          |
| 16. | Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition  No  | preparin              | g a bankruptcy petition?   |                 |  | rty to anyone you        |
|     | Yes. Fill in the details.   |                       |  |                 |  |                          |
|     | Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payment, if Not   | You                   | Description and value of any prop transferred                              | erty            | Date payment<br>or transfer was<br>made  | Amount of payment        |
|     | Balsley & Dahlberg<br>5130 North Second Street<br>Loves Park, IL 61111<br>www.balsleylawoffice.com  |                       | Attorney Fees  |                 | May 2016                                 | \$500.00                 |
| 17. | Within 1 year before you filed for bankrupromised to help you deal with your cree Do not include any payment or transfer that No  Yes. Fill in the details.   | ditors or             | to make payments to your creditor  |                 | r transfer any prope                     | rty to anyone who        |
|     | Person Who Was Paid<br>Address  |                       | Description and value of any prop transferred                              | erty            | Date payment or transfer was made        | Amount of payment        |
| 18. | Within 2 years before you filed for bank transferred in the ordinary course of yo Include both outright transfers and transfer include gifts and transfers that you have al  No Yes. Fill in the details. | ur busine<br>s made a | ess or financial affairs? as security (such as the granting of a s         |                 |  |                          |
|     | Person Who Received Transfer Address  Person's relationship to you  |                       | Description and value of property transferred                              |                 | any property or received or debts change | Date transfer was made   |
|     | · · · · · · · · · · · · · · · · · · ·   |                       |  |                 |  |                          |

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Debtor 1 Ethel L. Fort

|       | Within 10 years before you filed for ban<br>beneficiary? (These are often called asse   |              |  | any property to a  | self-settle | ed trust or similar device                           | of which    | you are a                               |
|-------|---|--------------|--|--------------------|-------------|--|-------------|---|
|       | No  |              |  |                    |             |  |             |   |
|       | Yes. Fill in the details.   |              |  |                    |             |  |             |   |
|       | Name of trust   |              | Description and  | value of the pro   | perty trans | sferred  | Date Tra    | ansfer was                              |
| Part  | List of Certain Financial Account   | s, Instrume  | ents, Safe Depos   | sit Boxes, and S   | torage Uni  | ts   |             |   |
| :     | Within 1 year before you filed for bankr<br>sold, moved, or transferred?<br>Include checking, savings, money mark<br>houses, pension funds, cooperatives, a | et, or othe  | r financial acco   | unts; certificates | s of depos  |  |             |   |
|       | No  |              |  |                    |             |  |             |   |
|       | Yes. Fill in the details.   |              |  |                    |             |  |             |   |
|       | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  |              | 4 digits of<br>unt number  | Type of acco       | unt or      | Date account was closed, sold, moved, or transferred |             | ast balance<br>e closing or<br>transfer |
|       | Do you now have, or did you have with cash, or other valuables?   | in 1 year bo | efore you filed fo   | or bankruptcy, a   | ny safe de  | posit box or other depos                             | itory for s | ecurities,                              |
|       | ■ No □ Yes. Fill in the details.  |              |  |                    |             |  |             |   |
|       | Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Co  | de)          | Who else had ad<br>Address (Number,<br>State and ZIP Code)           |                    | Describe    | the contents   | Do yo have  | ou still<br>it?                         |
| 22.   | Have you stored property in a storage (   | unit or plac | e other than you   | ur home within 1   | year befo   | re you filed for bankrupt                            | cy?         |   |
|       | ■ No  |              |  |                    |             |  |             |   |
|       | Yes. Fill in the details.   |              |  |                    |             |  |             |   |
|       | T   |              | Who also has a   | had agges          | Docaribo    | the contents   | Do w        | ou ctill                                |
|       | Name of Storage Facility Address (Number, Street, City, State and ZIP Co  | de)          | Who else has or<br>to it?<br>Address (Number,<br>State and ZIP Code) |                    | Describe    | the contents   | have        | ou still<br>it?                         |
| Part  | 19: Identify Property You Hold or Co  | ntrol for So | meone Else   |                    |             |  |             |   |
|       | Do you hold or control any property that for someone.   | at someone   | e else owns? Inc   | clude any proper   | ty you bor  | rowed from, are storing                              | for, or hol | d in trust                              |
|       | ■ No □ Yes. Fill in the details.  |              |  |                    |             |  |             |   |
|       | Owner's Name<br>Address (Number, Street, City, State and ZIP Co   | de)          | Where is the pro<br>(Number, Street, City<br>Code)                   |                    | Describe    | the property   |             | Value                                   |
| Part  | t 10: Give Details About Environmenta   | l Informati  | on   |                    |             |  |             |   |
| For t | the purpose of Part 10, the following de  | finitions ap | pply:  |                    |             |  |             |   |
| 1     | Environmental law means any federal, toxic substances, wastes, or material in regulations controlling the cleanup of t                                      | nto the air, | land, soil, surfa  | ce water, ground   | • .         |  |             |   |

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Ethel L. Fort

| 24. | Has any governmental unit notified you that you  No  | ı may be liable or potentially liable                                      | under or in violation of an environme | ental law?         |  |  |  |  |  |
|-----|--|--|---------------------------------------|--------------------|--|--|--|--|--|
|     | Yes. Fill in the details.  |  |                                       |                    |  |  |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) | Environmental law, if you know it     | Date of notice     |  |  |  |  |  |
| 25. | Have you notified any governmental unit of any   | release of hazardous material?   |                                       |                    |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.   |  |                                       |                    |  |  |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) | Environmental law, if you know it     | Date of notice     |  |  |  |  |  |
| 26. | Have you been a party in any judicial or adminis   | strative proceeding under any envir  | onmental law? Include settlements a   | and orders.        |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.   |  |                                       |                    |  |  |  |  |  |
|     | Case Title<br>Case Number  | Court or agency Name Address (Number, Street, City, State and ZIP Code)    | Nature of the case                    | Status of the case |  |  |  |  |  |
| Par | 11: Give Details About Your Business or Con  | nections to Any Business   |                                       |                    |  |  |  |  |  |
| 27. | Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? |  |                                       |                    |  |  |  |  |  |
|     | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time                    |  |                                       |                    |  |  |  |  |  |
|     | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)   |  |                                       |                    |  |  |  |  |  |
|     | ☐ A partner in a partnership   |  |                                       |                    |  |  |  |  |  |
|     | ☐ An officer, director, or managing execut   | ive of a corporation   |                                       |                    |  |  |  |  |  |
|     | ☐ An owner of at least 5% of the voting or   | equity securities of a corporation   |                                       |                    |  |  |  |  |  |
|     | ■ No. None of the above applies. Go to Part  | 12.  |                                       |                    |  |  |  |  |  |
|     | ☐ Yes. Check all that apply above and fill in the  | he details below for each business.  |                                       |                    |  |  |  |  |  |
|     |  | scribe the nature of the business  | Employer Identification number        |                    |  |  |  |  |  |
|     | Address<br>(Number, Street, City, State and ZIP Code)  | me of accountant or bookkeeper   | Do not include Social Security        | number or IIIN.    |  |  |  |  |  |
| 28. | Within 2 years before you filed for bankruptcy, of institutions, creditors, or other parties.                                    | did you give a financial statement to                                      | o anyone about your business? Inclu   | ide all financial  |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details below.   |  |                                       |                    |  |  |  |  |  |
|     | Name Address (Number, Street, City, State and ZIP Code)  | te Issued  |                                       |                    |  |  |  |  |  |
|     |  |  |                                       |                    |  |  |  |  |  |

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Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Ethel L. Fort Signature of Debtor 2 Ethel L. Fort Signature of Debtor 1 Date June 23, 2016 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| Fill in this infor  | mation to identify your   | case:   |                                 |   |
|---------------------|---|---|---------------------------------|---|
| Debtor 1            | Ethel L. Fort   |   |                                 |   |
|                     | First Name  | Middle Name   | Last Name                       |   |
| Debtor 2            |   |   |                                 |   |
| (Spouse if, filing) | First Name  | Middle Name   | Last Name                       |   |
| United States Ba    | ankruptcy Court for the:  | NORTHERN DISTRICT                                       | OF ILLINOIS                     |   |
| Case number         |   |   |                                 |   |
| (if known)          |   |   |                                 | ☐ Check if this is an   |
|                     |   |   |                                 | amended filing  |
| Official Fo         |   | n for Individu  | uals Filing Under               | <b>Chapter 7</b> 12/15  |
|                     | ividual filing under cha  | pter 7, you must fill out t<br>ur property, or          | his form if:                    |   |
| you have least      | sed personal property a<br>is form with the court w<br>ever is earlier, unless th | and the lease has not exp<br>rithin 30 days after you f | ile your bankruptcy petition or | by the date set for the meeting of creditors,<br>d copies to the creditors and lessors you list |

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt?    | Did you claim the property as exempt on Schedule C |
|---|--|--|
| Creditor's  | ☐ Surrender the property.  | □ No   |
| name:   | Retain the property and redeem it.                                 |  |
| Description of  | ☐ Retain the property and enter into a<br>Reaffirmation Agreement. | ☐ Yes  |
| property  | ☐ Retain the property and [explain]:                               |  |
| securing debt:  |  |  |
| Creditor's  | ☐ Surrender the property.  | □ No   |
| name:   | ☐ Retain the property and redeem it.                               |  |
| Description of  | ☐ Retain the property and enter into a<br>Reaffirmation Agreement. | ☐ Yes  |
| property  | ☐ Retain the property and [explain]:                               |  |
| securing debt:  |  |  |
| Creditor's  | ☐ Surrender the property.  | □ No   |
| name:   | ☐ Retain the property and redeem it.                               |  |
| Description of  | ☐ Retain the property and enter into a<br>Reaffirmation Agreement. | ☐ Yes  |
| property  | ☐ Retain the property and [explain]:                               |  |
| securing debt:  |  |  |
| Creditor's  | ☐ Surrender the property.  | □ No   |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| Debtor 1 Ethel L. Fort  | Case number (if known  | D)                                 |
|---|--|------------------------------------|
| name:  Description of property securing debt:   | <ul> <li>□ Retain the property and redeem it.</li> <li>□ Retain the property and enter into a Reaffirmation Agreement.</li> <li>□ Retain the property and [explain]:</li> </ul>  | ☐ Yes                              |
| in the information below. Do not list real  | Property Leases se that you listed in Schedule G: Executory Contracts and Unexpirestate leases. Unexpired leases are leases that are still in effect; the property lease if the trustee does not assume it. 11 U.S.C. § 365(p) | ne lease period has not yet ended. |
| Describe your unexpired personal prope  | erty leases  | Will the lease be assumed?         |
| Lessor's name:<br>Description of leased<br>Property:  |  | □ No □ Yes                         |
| Lessor's name:<br>Description of leased<br>Property:  |  | □ No □ Yes                         |
| Lessor's name: Description of leased Property:  |  | □ No □ Yes                         |
| Lessor's name:<br>Description of leased<br>Property:  |  | □ No □ Yes                         |
| Lessor's name:<br>Description of leased<br>Property:  |  | □ No □ Yes                         |
| Lessor's name: Description of leased Property:  |  | □ No □ Yes                         |
| Lessor's name:<br>Description of leased<br>Property:  |  | □ No □ Yes                         |
| Under penalty of perjury, I declare that I h property that is subject to an unexpired le  X /s/ Ethel L. Fort Ethel L. Fort Signature of Debtor 1 | nave indicated my intention about any property of my estate that sease.  X Signature of Debtor 2   | ecures a debt and any personal     |
| Date June 23, 2016  | Date   |                                    |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-81579 Doc 1 Filed 06/30/16 Entered 06/30/16 10:38:28 Desc Main Document Page 40 of 46

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**Northern District of Illinois

| In re       | Ethel L. Fort   |  | Case No.  |  |
|-------------|---|--|---|--|
|             |   | Debtor(s)  | Chapter   | 7  |
|             | DISCLOSURE OF COMPE   | NSATION OF ATTOR   | NEY FOR DE  | EBTOR(S)   |
| C           | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filinger rendered on behalf of the debtor(s) in contemplation   | ng of the petition in bankruptcy,  | or agreed to be paid  | to me, for services rendered or to               |
|             | For legal services, I have agreed to accept   |  | \$  | 500.00   |
|             | Prior to the filing of this statement I have received   |  |   | 500.00   |
|             | Balance Due   |  | \$  | 0.00   |
| 2. \$       | 8 83.75 of the filing fee has been paid.  |  |   |  |
| 3. 7        | The source of the compensation paid to me was:  |  |   |  |
|             | ■ Debtor □ Other (specify):   |  |   |  |
| 4. T        | The source of compensation to be paid to me is:   |  |   |  |
|             | ■ Debtor □ Other (specify):   |  |   |  |
| 5. l        | ■ I have not agreed to share the above-disclosed comp   | pensation with any other person u  | inless they are mem   | bers and associates of my law firm.              |
| I           | ☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na  |  |   |  |
| <b>6.</b> ] | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:   |  |   |  |
| t<br>c      | a. Analysis of the debtor's financial situation, and render. Preparation and filing of any petition, schedules, state. Representation of the debtor at the meeting of credit defects. [Other provisions as needed] Negotiations with secured creditors to reduce agreements and applications as needed; proof liens on household goods. | tement of affairs and plan which<br>ors and confirmation hearing, and<br>uce to market value; exemptio | may be required;<br>d any adjourned hea<br>n planning; prepar | rings thereof; ation and filing of reaffirmation |
| 7. I        | By agreement with the debtor(s), the above-disclosed fee does not include the following service:  Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.  |  |   |  |
|             |   | CERTIFICATION  |   |  |
|             | certify that the foregoing is a complete statement of an ankruptcy proceeding.  | ny agreement or arrangement for  | payment to me for re  | epresentation of the debtor(s) in                |
| Ju          | une 23, 2016  | /s/ Jeffry A Dahlber   | g   |  |
|             | ate   | Jeffry A Dahlberg  |   |  |
|             |   | Signature of Attorney<br>Balsley & Dahlberg  |   |  |
|             |   | 5130 North Second  |   |  |
|             |   | Loves Park, IL 611   | 11  |  |
|             |   | (815) 877-2593 Fa  |   | i  |
|             |   | www.balsleylawoffi Name of law firm  | ce.com  |  |
|             |   | warne ој taw jirm  |   |  |

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

In re: Ethel L. Fort

Case No.: 16-

Judge Thomas M Lynch

# RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 7 DEBTORS AND THEIR ATTORNEYS

### BEFORE THE CASE IS FILED

### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case as required by Local Bankruptcy Rule and explain how and when the attorney's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, statements and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, statements and schedules.
- 5. Advise the debtor of the need to maintain appropriate insurance.

### AFTER THE CASE IS FILED

### THE DEBTOR AGREES TO:

1. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card

does not include the debtor's social security number, the debtor will also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.

- 2. Notify the attorney of any change in the debtor's address or telephone number.
- 3. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 4. Contact the attorney immediately if the debtor loses employment, has a significant change in income or experiences any other significant change in financial situation (such as serious illness, lottery winnings or an inheritance).
- 5. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 6. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the Internal Revenue Service or the Illinois Department of Revenue.
- 7. Contact the attorney before selling real property while the bankruptcy is pending.
- 8. Pay all fees for amendments in a timely fashion.

### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination).
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 7 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely prepare, file and serve any necessary amended statements and schedules and any change of address in accordance with information provided by the debtor.
- 7. Monitor all incoming case information.

- 8. Prepare, file and serve all appropriate motions to avoid liens.
- 9. Provide any other legal services necessary for the administration of the case before the Bankruptcy Court.
- 10. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 11. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise not engaging in proper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 12. The services to be provided by the attorney specifically exclude the representation in any adversary proceeding filed by any creditor.

| Date: 6-23-16 |
|---------------|
|---------------|

Total fee to be paid for attorney's services:

\$ 500.00

(Do not sign if this line is blank)

I understand that I may be subject to a random audit conducted by a private audit firm pursuant to §603 of the Bankruptcy Code and will have to produce certain documents which may include pay stubs for the six (6) calendar months prior to filing; two years of federal tax returns, including any schedules and forms; account statements for all depository and investment accounts for six calendar months preceding the date of filing of the petition, plus the month in which the petition was filed, along with sufficient documentation to reasonably explain the source of deposits or credits and the purpose of checks, withdrawals or debits and a copy of any divorce decree and/or property settlement entered within the last three years and any current child support/alimony obligation that I may have.

Signed:

Ethel L. Fort, Debtor

Jeffry A Dahlborg, Attorney for Debtor(s).

BALSLEY & DAHLBERG 5130 North Second Street Loves Park, IL 61111-5002 815-877-2593

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### Attorney - Client Agreement Chapter 7

The undersigned hires Balsley & Dahlberg Law Office for representation in a Chapter 7 bankruptcy under the following terms and conditions. I/We have signed and received a copy of the "Court Approved Retention Agreement" between Chapter 7 Debtors and their attorney as established by the Bankruptcy Court for the Northern District of Illinois, and any terms that conflict with it are null and void. I/We understand more than one Attorney or office personal will work on my/our case.

I/We understand the court cost of \$335.00 is not included in attorney fees. I/We also understand the cost for the credit counseling or financial management classes are not included in the attorney fees. Attorney fees are fixed (\$500.00 single & \$550.00 joint). Fees and "advance payment retainers" for pre-filing work, become property of this firm on payment and are deposited into the firm's operating account. Payments are applied to the fees. If this contract is terminated by either party prior to the filing of the case, we will submit any dispute to binding arbitration within 30 days. If I/we close my file or breach this contract I agree to pay for the work done to that time. I/We assign to my/our attorney all amount tendered as filing fees or court cost and authorize my attorney to transfer said funds from his trust account to his operating account in payment of all outstanding fees owed by me/us if case is not filed.

I/We understand that these fees above do not apply to, and the Attorney is not hired to represent me/us in the following: Adversary proceedings, Asset proceedings, Appeals or Proceeding in any non-bankruptcy court or administrative agency. The attorney may require additional fees allowed by the "Court Approved Retention Agreement" or other circumstances, such as any Adversary proceedings or if my case is deemed an Asset Case. If additional fees are required they will be paid up front prior to any work on these matters. I/We understand that if a motion needs to be filed to extend the Discharge to obtain a Reaffirmation Agreement in my/our case I/we will have to pay the postage and any other fees associated with this motion.

Balsley & Dahlberg Law Office is not representing me/us in state or any other courts regarding creditors in my/our bankruptcy. Any state court action not stopped by the Automatic Stay of a filed bankruptcy is my/our responsibility.

I/we must disclose any such claims or property I/we now have or acquire after filing Chapter 7 to my attorney and the court in a filed amendment and obtain authority to keep them.

I/We understand that to receive a reaffirmation agreement I/we need to be current on all payments. I/We understand the Attorney will make every attempt to obtain a Reaffirmation Agreement but cannot guarantee that we will receive one. I/We understand that Reaffirmation Agreements are voluntarily entered into, if the creditor refuses to provide a Reaffirmation Agreement there in nothing in the Bankruptcy Code to force them to prepare one. I/We agree to read my/our petition before signing it so that I/we know what is included.

(Please initial on red line below)

If I/we have any of the following debts they will NOT be discharged: traffic/parking/tollway fines; criminal fines; student loans; educational debts/tuition; child support/maintenance; taxes; NSF criminal court; debts incurred by fraud or other debts found non-dischargeable by the Bankruptcy Court, and the holder of these will be free to pursue collection after the entry of the discharge order.

I/We also understand that if I/we received any sum of money other than through employment, including but not limited to life insurance proceeds, workers compensation award, personal injury or other court settlement, I /we MUST notify the attorney immediately and may have to pay some or all of the funds into the Chapter 7.

I/We cannot transfer any property or incur any credit or debt without the express permission of my/our attorney or the Court, and I/We must make full disclosure of all income, expenses, debts, and assets in my/our initial consultation and on my bankruptcy petition. If I/we fail to take my financial management class that my case may be closed without discharge, and I/we well be required to pay a fee to the Attorney and the Courts to have it reopened.

Ethel L. Fort, Debtor

, Joint Debtor

Jeffry A. Dahlherg, Attorney for Debtor (s)

Dated: 6.23.14

### **United States Bankruptcy Court** Northern District of Illinois

| In re | Ethel L. Fort                                | Debtor(s)   | Case No. Chapter 7             |              |
|-------|--|---|--------------------------------|--------------|
|       | VER  | RIFICATION OF CREDITOR M                            | IATRIX                         |              |
|       |  | Number of   | Creditors:                     | 5            |
|       | The above-named Debtor(s) h (our) knowledge. | nereby verifies that the list of credi              | tors is true and correct to th | e best of my |
| Date: | June 23, 2016                                | /s/ Ethel L. Fort Ethel L. Fort Signature of Debtor |                                |              |

BlueCross BlueShield of Illinois P.O. Box 3239
Naperville, IL 60566-7240

Capital One P.O. Box 30285 Salt Lake City, UT 84130-0285

Capital One Bank c/o Blatt Hasenmiller et al 211 Landmark Drive, Suite C1 Normal, IL 61761-2160

Dennis Brebner & Associates 860 Northpoint Blvd. Waukegan, IL 60085-8211

Phillips & Cohen Associates P.O. Box 5790 Hauppauge, NY 11788-0164